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PTO/SB/01 (08-03)
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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Attorney Docket Number 10442-004 DECLARATION FOR UTILITY OR First Named Inventor Tara Nylese DESIGN COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) Application Number Filing Date Declaration Declaration OR Submitted Submitted after Initial Art Unit With Initial Filing (surcharge Filing (37 ČFR 1.16 (e)) **Examiner Name** required) I hereby declare that: Each inventor's residence, mailing address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled: PORTABLE DIAGNOSTIC DEVICE AND METHOD FOR DETERMINING TEMPORAL VARIATIONS IN CONCENTRATONS (Title of the Invention) the specification of which is attached hereto OR **1** 10/08/2003 was filed on (MM/DD/YYYY) as United States Application Number or PCT International PCT/US03/31859 Application Number and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed. **Prior Foreign Application Priority Foreign Filing Date** Certified Copy Attached? Country Number(s) (MM/DD/YYYY) Not Claimed Yes No Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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## **DECLARATION** — Utility or Design Patent Application

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I hereby declare that all states and belief are believed to b statements and the like so ma false statements may jeopardi	e true; and furt ide are punishat	ther that thes ole by fine or	se stat imprisc	ement onmen	s were t, or bo	made	with er 18	the kno	owledge that willful false	
NAME OF SOLE OR FIRST I	NVENTOR:		Ap	etition	has be	en filed	for th	is unsia	ned inventor	
Given Name (first and middle [if any]) TARA					Family Name			NYL		
Inventor's Signature					<b>.</b>		-	······	Date 3/29/05	
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NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor										
Given Name (first and middle [if any])				<u> </u>	Far	Family Name or Surname				
Inventor's Signature		<del> </del>			J				Date	
Residence: City	State			Country			Citizenship			
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City	State .			ZIP				Country		
Additional Inventors or a legal rep	resentative are being	named on the	su	pplemen	tal sheet	s) PTO/S	B/02A	or 02LR at	tached hereto.	

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